

**RULES
OF
DEPARTMENT OF COMMUNITY HEALTH**

**CHAPTER 111-4-1
STATE HEALTH BENEFIT PLAN**

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(5)(a):

The Subscriber is responsible for assuring that the proper premium payments are deducted or reduced from the Subscriber's salary or retirement benefit for the Option and Coverage Tier that was selected. Premiums of Subscribers that are paid through direct pay are to be paid in accordance with their coverage selection. For the State Fiscal Year 2006 plan year (July 1, 2005, through December 31, 2005), non-retiree subscribers will be required to select Option and Coverage Tier electronically. For this plan year only, the Commissioner may permit subscribers who failed to do so one additional opportunity to select Option and Coverage Tier.

Authority: O.C.G.A. §§ 45-18-1 *et. seq.*, 20-2-922, 20-2-881, 20-2-894, 20-2-911, 20-2-897, 20-2-925, 50-18-72, 50-18-94, Health Insurance Portability and Accountability Act (HIPAA).